UNITED STATES DISTRICT COURT

for the

Western Distric	western District of Pennsylvania		
United States of America, ex rel., Jonathan D'Cunha, M.D.)))		
Plaintiff(s) v. Dr. James D. Luketich, University of Pittsburgh Medical Center, and University of Pittsburgh Physicians,)) Civil Action No. 2:19-cv-495)))		
Defendant(s))		

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) University of Pittsburgh Physicians c/o Robert J. Ridge, Esquire Clark Hill One Oxford Centre 301 Grant Street, 14th Floor Pittsburgh, PA 15219

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney,

whose name and address are:

Adam B. Fischer Assistant U.S. Attorney Joseph F. Weis Jr., U.S. Courthouse 700 Grant Street, Suite 4000 Pittsburgh, PA 15219

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

"ENGTM'QH'EQWTV

Laura Kim 09/03/2021 "Fcw""""Uki pcwtg"qh" Ergtmlqt "Fgr w{ "Ergtm Civil Action No. 2:19-cv-495

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

was rec	This summons for (nanceived by me on (date)	me of individual and title, if ar	ıy)		
	•	I the summons on the ind	lividual at (place)		
	on (date)			; or	
	☐ I left the summons at the individual's residence or usual place of abode with (name) , a person of suitable age and discretion who residence			ides there	
	on (date), and mailed a copy to the individual's last known address; or				
		ons on (name of individual)	s on behalf of (name of organization)	, who is	
	designated by law to	accept service of process	on (date)	; or	
	☐ I returned the sum	mons unexecuted because	e	; or	
	☐ Other (specify):				
	My fees are \$	for travel and S	for services, for a total of \$	0.00	
	I declare under penalty of perjury that this information is true.				
Date:		_			
			Server's signature		
		_	Printed name and title		
		-	Server's address		

Additional information regarding attempted service, etc:

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